



HEALTH ALERT

#38

OUTBREAK OF HEPATITIS A

TO: West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities

FROM: Catherine C. Slemp, MD, MPH, State Health Officer
WVDHHR, Bureau for Public Health (BPH)

DATE: November 1, 2010

LOCAL HEALTH DEPARTMENTS: PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

OTHER RECIPIENTS: PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

In collaboration with local health departments, West Virginia Bureau for Public Health (WVBPH) is investigating an outbreak of hepatitis A. To date, four (4) confirmed cases have been reported from Cabell, Jackson and Wayne Counties with illness onset between October 16 and 24, 2010.

Physicians should assure that persons with signs and symptoms of viral hepatitis are tested for the following markers of acute viral hepatitis: hepatitis A IgM; hepatitis B surface antigen (HBsAg) and hepatitis B core IgM (anti-HBc IgM); and anti-hepatitis C antibody with signal-to-cut-off ratio or another confirmatory test. Providers and laboratories should report positive hepatitis A IgM results to the local health department within 24 hours. Hepatitis B and C should be reported to WVBPH.

Signs and symptoms of hepatitis include: fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, light-colored stool, arthralgia, and jaundice. Young children with hepatitis A are more likely to be asymptomatic.

Hepatitis A can be spread by contaminated food or water or by the fecal-oral route. Hepatitis A transmission can occur readily in daycares and in congregate settings with poor hygiene. Persons using injection and non-injection illegal drugs and men who have sex with men are also at risk for hepatitis A.

For questions about hepatitis A, this outbreak or disease reporting, contact the Division of Infectious Disease Epidemiology at: (800)-423-1271.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments, infection preventionists, hospital laboratories, and state response partner associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience.

Categories of Health Alert messages:

Health Alert: Conveys the highest level of importance, warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation. May not require immediate action.

Health Update: Provides updated information regarding an incident or situation. Unlikely to require immediate action.